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FEE TRANSMITTAL for FY 2000 Patent fees are subject to annual revision.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.

(\$) 710.00 TOTAL AMOUNT OF PAYMENT

Complete if Known			
Application Number			
Filing Date			
First Named Inventor	Donald L. Glick		
Examiner Name			
Group / Art Unit			
Attorney Docket No.	BRM0002		

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)			
The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: Deposit	3. ADDITIONAL FEES Large EntitySmall Entity Fee Fee Fee Fee Fee Code (\$) Code (\$)	Fee Paid		
Account Number	Code (\$) Code (\$) 105 130 205 65 Surcharge - late filing fee or oath	0.00		
Deposit Account	127 50 227 25 Surcharge - late provisional filing fee or cover sheet.	0.00		
Name Baker & Daniels	139 130 139 130 Non-English specification	0.00		
Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17	147 2,520 147 2,520 For filing a request for reexamination	0.00		
	112 920* 112 920* Requesting publication of SIR prior to Examiner action	0.00		
2.	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action	0.00		
FEE CALCULATION	115 110 215 55 Extension for reply within first month	0.00		
	116 380 216 190 Extension for reply within second month	0.00		
1. BASIC FILING FEE Large Entity Small Entity	117 870 217 435 Extension for reply within third month	0.00		
Fee Fee Fee Fee Description	118 1,360 218 680 Extension for reply within fourth month	0.00		
1010 (0) 0010 (0)	128 1,850 228 925 Extension for reply within fifth month	0.00		
101 690 201 345 Utility filling fee 710.00	119 300 219 150 Notice of Appeal	0.00		
107 480 207 240 Plant filing fee	120 300 220 150 Filing a brief in support of an appeal	0.00		
108 690 208 345 Reissue filing fee	121 260 221 130 Request for oral hearing	0.00		
114 150 214 75 Provisional filing fee	138 1,510 138 1,510 Petition to institute a public use proceeding	0.00		
	140 110 240 55 Petition to revive - unavoidable	0.00		
SUBTOTAL (1) (\$) 710.00	141 1,210 241 605 Petition to revive - unintentional	0.00		
2. EXTRA CLAIM FEES Fee from	142 1,210 242 605 Utility issue fee (or reissue)	0.00		
Extra Claims below Fee Paid	143 430 243 215 Design issue fee	0.00		
Total Claims 12 -20** = 0 × 18 = 0	144 580 244 290 Plant issue fee	0.00		
Independent 3 - 3** = X 78 =	122 130 122 130 Petitions to the Commissioner	0.00		
Multiple Dependent	123 50 123 50 Petitions related to provisional applications	0.00		
**or number previously paid, if greater, For Reissues, see below	126 240 126 240 Submission of Information Disclosure Stmt	0.00		
Large Entity Small Entity Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	581 40 581 40 Recording each patent assignment per property (times number of properties)	0.00		
103 18 203 9 Claims in excess of 20	146 690 246 345 Filing a submission after final rejection (37 CFR § 1.129(a))	0.00		
102 78 202 39 Independent claims in excess of 3	149 690 249 345 For each additional invention to be			
104 260 204 130 Multiple dependent claim, if not paid	examined (37 CFR § 1.129(b))	0.00		
109 78 209 39 ** Reissue independent claims over original patent	Other fee (specify)	0.00		
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	Other fee (specify)	0.00		
SUBTOTAL (2) (\$) 0.00	Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.0	00		
SUBMITTED BY Complete (if analicable)				

SUBMITTED BY			Complete (if applicable)		
Name (Print/Type)	Kevin R. Erdman	Registration No. (Attorney/Agent)	33,687	Telephone	317-569-4621
Signature	Z.M.			Date	31 Oct 000
	/ WARNING:				

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EXPRESS MAIL NO.: EL 415 382 253.US

Application No. not yet assigned Inventor: Donald L. Glick, et al

Title: MINISTRY SPECIALIZED INSURANCE TRANSACTION......

Practitioner's Docket No.: BRM0002 (#88065/2)

Date of Deposit: October 31, 2000

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR §1.10 on the date indicated above and is addressed to the Commissioner of Patents, Box New Patent Application, Washington, D.C. 20231.

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EXPRESS MAIL NO.: EL 415 382 253.US

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Date

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UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. BRM0002

First Inventor or Application Identifier Donald L. Glick

Title See 1 in Addendum

Express Mail Label No. FL 415 382 253 US

Express Mail Label No. EL 415 382 253 US (Only for new nonprovisional applications under 37 C.F.R. § 1.53(b)) Assistant Commissioner for Patents APPLICATION ELEMENTS ADDRESS TO: **Box Patent Application** See MPEP chapter 600 concerning utility patent application contents. Washington, DC 20231 * Fee Transmittal Form (e.g., PTO/SB/17) 5. Microfiche Computer Program (Appendix) (Submit an original and a duplicate for fee processing) 6. Nucleotide and/or Amino Acid Sequence Submission X Specification [Total Pages (if applicable, all necessary) (preferred arrangement set forth below) Computer Readable Copy Descriptive title of the Invention - Cross References to Related Applications Paper Copy (identical to computer copy) b. - Statement Regarding Fed sponsored R & D Statement verifying identity of above copies C. - Reference to Microfiche Appendix - Background of the Invention ACCOMPANYING APPLICATION PARTS - Brief Summary of the Invention 7. Assignment Papers (cover sheet & document(s)) - Brief Description of the Drawings (if filed) 37 C.F.R.§3.73(b) Statement | Power of - Detailed Description (when there is an assignee) Attorney - Claim(s) 9. English Translation Document (if applicable) - Abstract of the Disclosure Copies of IDS Information Disclosure n [Total Sheets | 59 Drawing(s) (35 U.S.C. 113) Statement (IDS)/PTO-1449 Citations Preliminary Amendment 11. Oath or Declaration [Total Pages 5 Return Receipt Postcard (MPEP 503) 12. Newly executed (original or copy) (Should be specifically itemized) Copy from a prior application (37 C.F.R. § 1.63(d)) * Small Entity Statement filed in prior application (for continuation/divisional with Box 16 completed) Statement(s) Status still proper and desired **DELETION OF INVENTOR(S)** (PTO/SB/09-12) Certified Copy of Priority Document(s) Signed statement attached deleting (if foreign priority is claimed) inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b). 15. Other: NOTE FOR ITEMS 1 & 13 IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28). 16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment: Continuation-in-part (CIP) of prior application No: Continuation Divisional Group / Art Unit: Prior application information: Examiner For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The Incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. CORRESPONDENCE ADDRESS 17. Customer Number or Bar Code Labe! X Correspondence address below (Insert Customer No. or Attach bar code label here) Kevin R. Erdman Name Baker & Daniels **Suite 2700** Address 300 N. Meridian Street IN Zip Code 46204 Citv Indianapolis. 317-569-4621 317-569-4800 Country Telephone Registration No. (Attorney/Agent) 33,687 Name (Print/Type) Kevin R, Erdman

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.



Signature

Attachment to PTO/SB/05 (4/98) Utility Patent Application Transmittal

1. MINISTRY SPECIALIZED INSURANCE TRANSACTION OBJECT ORIENTED SYSTEM AND METHOD.







About Our Agency

About Brotherhood Mutual

Brotherhood Mutual Insurance Company specializes in insuring churches and related ministries. For more than 80 years, they have helped protect America's religious institutions through quality insurance products and services specifically designed to meet the needs of today's ministries.

Financial Profile

Over the past decade Brotherhood Mutual has consistently earned an A (Excellent) or A+ (Superior) rating from A.M. Best, one of the nation's leading authorities in analyzing and rating insurance companies.

With more than \$110 million of admitted assets and reinsured by more than a dozen A and A+ rated reinsurers with billions in admitted assets, they are well able to handle the insurance needs of every church and related ministry operating in their licensed states.

Resources

In addition to superior insurance products, Brotherhood Mutual also believes it's good business to provide customers with relevant, up-to-date information to help them protect and build their churches and ministries. To help policyholders better manage their risks and understand their insurance needs and coverage, Brotherhood Mutual offers a wide variety of valuable print, multi-media, and online resources.

Company History

In 1916, Albert Neuenschwander enlisted the help of his pastor in organizing a mutual aid program to provide fire and windstorm protection for members of his denomination. The next year, their denomination formed the Brotherhood Aid Association, selecting Galatians 6:2—"Bear ye one another's burdens and so fulfill the law of Christ"—as the verse capturing the spirit of the new association. This verse still appears on every Brotherhood Mutual policy.

Throughout the past several decades, the company has grown and expanded its church base, offering insurance programs to other denominations and associations. Today, Brotherhood Mutual is one of the country's leading insurers of churches and related ministries.



Property Insurance Summary

	lding scription	Building Value	Replacement Cost	Personal Property Value	Replacement Cost
		0	Yes	0	Yes
			_Yes		Yes
			Yes		Yes
			Yes		Yes
			Yes		Yes
<u>(1)</u>	Scheduled Values:		Scheduled C	Option	
آل	Inflation Adjustment C	Option:	Adjusted M	anually	
37	Peril Option:		Special		
Ey.	Coinsurance Clause:		Waived		
<u>•3</u>	Earthquake:		Not Include	d	
	Deductibles				·
	Building & Personal	Property Losses:	\$500		
	Building Glass:		\$500		
ڙي	Property Protector End	lorsement:	\$2,500 Wat	er Damage w/Ordi	nance & Law
	Loss of Building Mater	rials:	\$5,000 fron	Property Protecto	r
11)	Theft of Money & Secu	urities:	\$2,000 Basi	ic	
	Additional Coverage	e:	\$0	\$	0 Deductible
12)	Equipment Breakdow	n Endorsement:	Included		
12	Bond (Employee Fidel	lity):	\$2,500 Bas	ic	
	Inland Marine:		\$0	\$	60 Deductible

Throughout this proposal, small symbols like this have been used to refer you to the appropriate page in your MinistryFirstSM Leader's Guide. Simply turn to the indicated page to learn more about your MinistryFirstSM coverage options.

Automatic Building and Personal Property Extensions

Direct loss extensions	Extension limit (policy deductible applies)
al: Property taken off premises	\$25,000 (180 days)
2. Personal property outside policy territory	\$500 per item; \$2,500 maximum limit (45 days)
3 Personal property at owned parsonage	\$2,500
4. Newly acquired or constructed buildings	\$2,000,000 (180 days)
5. Outside objects and structures	\$10,000 per item; \$15,000 maximum
6. Other unscheduled structures	\$10,000
7. Dwelling-related unscheduled structures	10% of dwelling value
8. Improvements made by tenants	10% of personal property limit; \$20,000 maximum
Direct loss extensions	Extension limit (no deductible applies)
1. Personal property of others (non-clergy)	\$2,500 per person/\$10,000 maximum (excess)
2. Personal property of clergy	\$10,000 per clergy/\$30,000 maximum
Additional coverages	Additional limit (no deductible applies)
1. Debris removal expense	\$10,000
2. Fire department service charge	\$5,000
3. Fire extinguisher recharge	\$2,500 if recharged within 30 days
4. Automatic fire suppression recharge	Covered if discharge caused by a covered peril
Pollutant clean-up and removal at insured premises	\$10,000 if pollution resulted from covered peril and was reported within 180 days
6. Installed lock recalibration after theft	\$2,500 if recalibrated within 10 days
7. Arson reward	\$10,000
8. Tuition earnings and loss of rental income	\$25,000 blanket limit
9. Extra expense	\$100,000
10. Valuable papers and records	\$10,000
Additional Coverages	Additional limit (deductible applies)
1. Loss of money and securities	\$5,000; loss from specified perils only
2. Interior building damage	Rain, snow, ice, sleet, sand, dust, baptistry . overflow included
3. Spoilage	\$2,500
4. Electric current	\$500
5. Animal damage	\$2,500, except types of damage excluded in form
6. Damage to gutters & downspouts from weight of ice and snow	Included with special perils form
7. Building glass	Included; no per pane or occurrence limitations



Liability Insurance Summary

Liability Limits:

\$1,000,000 General Occurrence

\$0 General Aggregate

Liability Coverage Format:

Occurrence Basis—All Liability Coverages and Options

Primary Ministry Risk Type:

Related Ministry Risk Type(s):

In addition to basic general liability coverage, the following are some of the more important automatic coverage enhancements included for the primary or related ministry risk types listed above:

Wage Loss Reimbursement and Medical Payments

Coverage Description	Status	Liability Limits
Wage Loss Reimbursement:	Included	\$2,000 per Person
Medical Payments:	Included	\$5,000 per Person
Athletic Medical:	Included	Same as Med-Pay Limit

Notes:



Additional Liability Coverages

If separate liability limits are indicated for any optional coverage below, these limits are separate per occurrence and annual aggregate limits that apply to the optional coverage. If any optional liability coverage below is shown as included and "General" limits are indicated, the basic general occurrence and general aggregate limits indicated on the previous page apply to that coverage.

	Coverage description	Status	Liability Limits
(II)	Sexual Acts Liability:	Included	*0
	Counseling Acts Liability:	Included	General
19)	Religious Communication SM & Religious Acts SM Liability:	Included	General
20)	Discriminatory Acts Liability:	Included	General
20)	Directors and Officers Liability:	Included	General
22)	Special Defense Reimbursement:	Included	\$25,000/\$5,000
24	Nonowned Vehicle Coverage:	Included	General
	Rental Vehicle Physical Damage:	Included	\$30,000 per Vehicle
21)	Employee Benefits Liability:	Included	General
21)	Employment Practices Liability:	Included	**\$300,000
	Breach of Contract Deductible:	\$1,000	
28)	Clergy (Full-time) Accidental Death Benef	it:	None
	Fee-Based Counseling Liability:	Available, Not Included	N/A
	School Counseling Acts Liability:	Available, Not Included	N/A
	Education Preparation Liability: Including Accreditation Errors	Available, Not Included	N/A

^{*}Occurrence and aggregate limits are the same

^{**} Subject to a separate aggregate



Special Clergy Coverages

	Name of Covered Insured Person: N/A	
1	Clergy/Pastoral Staff Personal Property Coverage:	\$0
	Deductible:	\$250
	Scheduled Personal Property:	\$0
	Deductible:	\$50 ·
9	Clergy/Pastoral Staff Personal Liability Coverage:	\$0
	Annual Aggregate:	\$0
	Clergy/Pastoral Staff Recreational Vehicle Liability:	None
	Name of Covered Insured Person: N/A	
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<u>an</u>)	Clergy/Pastoral Staff Personal Property Coverage:	
	Deductible:	
	Scheduled Personal Property:	
· (Deductible	
a),	Clergy/Pastoral Staff Personal Liability Coverage:	
	Annual Aggregate:	
	Clergy/Pastoral Staff Recreational Vehicle Liability:	
	Name of Covered Insured Person: N/A	
2		
	Clergy/Pastoral Staff Personal Property Coverage:	
	Deductible:	
	Scheduled Personal Property:	
•	Deductible	
<u>a</u>	Clergy/Pastoral Staff Personal Liability Coverage:	
	Annual Aggregate:	

Clergy/Pastoral Staff Recreational Vehicle Liability:



Blanket Accident & Sickness Insurance Summary

Group 1 Description: Group Description

Accident & Sickness Medical Benefit Limit: \$ Per Person

Annual Aggregate Limit/

One Reinstatement Guaranteed: \$0

Minimum and Deposit Premium: \$0

Annual or Policy Premium/Participant: \$0

Audit Procedure: Semi-Annual

Group 2 Description: None Requested at Time of Proposal

Accident & Sickness Medical Benefit Limit: \$ Per Person

Annual Aggregate Limit/
One Reinstatement Guaranteed: \$0

Minimum and Deposit Premium: \$0

Annual or Policy Premium/Participant: \$0

Audit Procedure: Semi-Annual





Workers' Compensation Insurance Summary



Statutory benefits including: medical expenses, disability benefits, rehabilitation benefits, and death benefit for occupational injuries and illnesses.

Provides benefits as required of employers in the state of: state name

	Employers' Liability				
33)	Bodily Injury by Accident:	\$100,000	Each Accident		
	Bodily Injury by Disease:	\$100,000	Each Employee		
	Bodily Injury by Disease:	\$500,000	Policy Limit		
	Employee Payroll Class	sifications &	Payroll Estimates		
	Payroll Category	. Es	Estimated Annual Payroll		
	enter category here		<u> </u>		
					

Audit Requirement: Annual



Owned Vehicle Insurance Summary

Vehicle Schedule Year Make and Model Comprehensive Collision Towing Unit 1 \$100 Deductible \$250 Deductible Yes Not Included No 2 Not Included 3 Not Included Not Included No Not Included Not Included No Not Included No Not Included **Liability Limits** Bodily Injury & Property Damage Combined Limit Option: Not Applicable Bodily Injury & Property Damage Split Limit Option: N/A Bodily Injury-Each Person: N/A Bodily Injury-Each Accident: Property Damage-Each Accident: N/A Uninsured/Underinsured Motorists: Same as Liability Limits Vehicle Medical Payments \$0 Benefit Limit Per Person: \$0 Benefit Limit Per Accident: Personal Injury Protection (No Fault) Not Applicable N/A Benefits as provided by the statutes of state of: N/A Benefit Description: N/A Benefit Limit:

Notes:



Excess Liability Insurance Summary

🐸 Liability Limits

Covered Liability-Each Occurrence:

\$0

Covered Liability-Annual Aggregate:

\$0

Deductible or Self-Insured Retention:

Coverage Restrictions

If any coverage restrictions are indicated below, these specific liability coverages are not extended into or covered by the excess (umbrella) liability limits. Only the liability coverage provided in the primary liability policies, if any, apply.

Sexual Acts

Outside Counseling Reimbursement

Employment Practices

Pesticide Application

Financial Damage

Education Preparation

Nurses Liability

Employee Benefit

Clergy Personal

Wage Loss Reimbursement

Defense Coverage



Premium Summary

Property/Liability (Package Policy) Premium:	\$0
Blanket Accident & Sickness Policy Premium:	\$0
Workers' Compensation Policy Premium:	\$0
Owned Vehicle Policy Premium:	\$0
Excess (Umbrella) Liability Premium:	\$0

Total Premium: \$0

Payment Options and Information

For most coverages, payments can be made in monthly, quarterly, semi-annual, or annual installments, depending on annual premium amounts. *Direct Pay* is also available if you wish to have premium payments automatically withdrawn from your bank account.

A \$3.00 processing charge applies to each installment. To reduce installment charges, you should select the payment option with the least number of installments appropriate for your budget.

Proposal Notes